Gas Strength and Tightness Testing (Non Domestic)

Enter Company Gas Safe Registration Number 12770

CUSTOMER DETAILS

Name (Mr/Mrs/Miss/Ms) ENGIE

Address STANAGE AB
36 ENDCLIFFE CRES
SHEFFIELD S10 3AF Postcode

Tel No

Contract Number

SERVICE CENTRE

Address

Postcode

Tel No

Indicate work undertaken	Tightness test	Strength test ✓
Scope of works PPM	Job No	

Test Instrument	
Type (water/elec etc)	ELECTRONIC
Serial No if applicable	5709264117

TIGHTNESS TEST DETAILS	TPCP1	TPCP1A
Tested To TPCP1 or TPCP1A tick as apropriate		✓
Gas type Natural Gas (NG) Liquefied Petroleum Gas (LPG)		NG
Installation - New (N) - New extension (NE) - Existing (E)		E
Could weather/changes in temperature affect test? Yes/No		
Meter type (Diaphragm, Rotary etc) (N/A if meter not included in test)		DIA
Meter designation (U16, U40, P7 etc) (N/A if meter not included in test)		U25
Pressure bypass installed if applicable (Yes/No/NA)		N/A
Gas meter volume (m^3)		0.037
Installation volume pipework and fittings (m^3)		0.010342
Installation volume total (m^3)		0.047342
Test medium - fuel gas, air		FUEL
Tightness test pressure (TTP) mbar/bar		21.0
Gauge GRM		0.5
Pressure gauge type (water, high SG, electronic etc)		ELEC
Maximum permitted leak rate (MPLR) m^3/h		
Maximum Permitted pressure drop (mbar)		4.2MB
Let-by test period (minutes)		2
Stabilisation period (minutes)		6
Tightness test duration (TTD) (minutes)		2
Any inadequately ventilated areas to check? Yes/No		NO
Is barometric pressure correction necessary? Yes/No		
FINDINGS		
Actual pressure drop (if any) mbar		0
Actual leak rate m3/hr		
Have inadequately ventilated areas been checked? Yes/NA		N/A
Tightness test Pass or Fail		PASS

STRENGTH TEST DETAILS	
Strength test method Pneumatic (P) or Hydrostatic (H)	
Installation - New (N) - New extension (NE) - Existing (E)	
Have components not suitable for strength testing been removed or isolated from installation as necessary (Yes/NA)	
Calculated strength test pressure (STP) (m/bar/bar)	
Test medium - air, nitrogen, water (hydrostatic test) etc	
Stabilisation period (minutes)	
Strength test duration (STD) (minutes)	
Permitted pressure drop (% STP)	
Calculated pressure drop (mbar/bar)	
FINDINGS	
Actual pressure drop (mbar/bar)	
Strength test Pass or Fail	

DECLARATION OF GAS SAFETY - I confirm that all of the above work described on this form has been satisfactorily completed in accordance with the current Gas Safety (Installation and [redacted] standards and procedures.

Engineers Signature [redacted] Date 28TH OCT 2020

Print Name [redacted]

Responsible Person's Signature

Attention : Where additional safety checks have been necessary to ensure the gas system is safe, the responsible person has been informed and has accepted the results. The installations has been left operational.

NOTIFICATION OF UNSAFE GAS INSTALLATION - I confirm that all of the above work described on this form has been satisfactorily completed in accordance with the current Gas Safety (Installation and Use) Regulations, Industry standards and procedures. However, an unsafe gas installation has been identified, details of which are listed on a separate Warning/Advice Notice.

Engineers Signature Date

Print Name

Responsible Person's Signature

Copies : WHITE - Customer Copy YELLOW - Site Copy PINK - Office Copy GREEN - Engineer's Copy

Gas Strength and Tightness Testing (Non Domestic)

Enter Company Gas Safe Registration Number 574561

CUSTOMER DETAILS

Name (Mr/Mrs/Miss/Ms) UoS Accommodation Village
Address Endcliffe Crescent.
Sheffield.
Stanage AB
Postcode S10 3EL
Tel No —
Contract Number UoS

SERVICE CENTRE

Address ENGIE
14 Endcliffe Crescent
Sheffield.
Postcode S10 3EA
Tel No 0114 222 4946

Indicate work undertaken	Tightness test	✓ Strength test
Scope of works	Job No	

Annual Gas PPM & Tightness Test.

Test Instrument	
Type (water/elec etc)	Electronic 20P.
Serial No if applicable	V200CJ26151

TIGHTNESS TEST DETAILS	TPCP1	TPCP1A
Tested To TPCP1 or TPCP1A tick as appropriate		✓
Gas type Natural Gas (NG) Liquefied Petroleum Gas (LPG)		NG.
Installation - New (N) - New extension (NE) - Existing (E)		E
Could weather/changes in temperature affect test? Yes/No		
Meter type (Diaphragm, Rotary etc) (N/A if meter not included in test)		D
Meter designation (U16, U40, P7 etc) (N/A if meter not included in test)		U25
Pressure bypass installed if applicable (Yes/No/NA)		NO
Gas meter volume (m^3)		0.037
Installation volume pipework and fittings (m^3)		0.008
Installation volume total (m^3)		0.045
Test medium - fuel gas, air		GAS
Tightness test pressure (TTP) mbar/psi*		20.0
Gauge GRM		NA
Pressure gauge type (water, high SG, electronic etc)		E
Maximum permitted leak rate (MPLR) m^3/h		
Maximum Permitted pressure drop (mbar)		42
Let-by test period (minutes)		2
Stabilisation period (minutes)		6
Tightness test duration (TTD) (minutes)		2
Any inadequately ventilated areas to check? Yes/No		NO
Is barometric pressure correction necessary? Yes/No		
FINDINGS		
Actual pressure drop (if any) mbar		0.0
Actual leak rate m3/hr		
Have inadequately ventilated areas been checked? Yes/NA		NA
Tightness test Pass or Fail		PASS

STRENGTH TEST DETAILS	
State test method Pneumatic (P) or Hydrostatic (H)	
Installation - New (N) - New extension (NE) - Existing (E)	
Have components not suitable for strength testing been removed or isolated from installation as necessary (Yes/NA)	
Calculated strength test pressure (STP) (m/bar/bar)	
Test medium - air, nitrogen, water (hydrostatic test) etc	
Stabilisation period (minutes)	
Strength test duration (STD) (minutes)	
Permitted pressure drop (% STP)	
Calculated pressure drop (mbar/bar)	
FINDINGS	
Actual pressure drop (mbar/bar)	
Strength test Pass or Fail	

DECLARATION OF GAS SAFETY - I confirm that all of the above work described on this form has been satisfactorily completed in accordance with the current Gas Safety (Installation and Use) Regulations, Industry standards and procedures.

Engineers Signature [redacted] Date 20/10/20.

Print Name [redacted]

Responsible Person's Signature [redacted]

Attention : Where additional safety checks have been necessary to ensure the gas system is safe, the responsible person has been informed and has accepted the results. The installations has been left operational.

NOTIFICATION OF UNSAFE GAS INSTALLATION - I confirm that all of the above work described on this form has been satisfactorily completed in accordance with the current Gas Safety (Installation and Use) Regulations, Industry standards and procedures. However, an unsafe gas installation has been identified, details of which are listed on a separate Warning/Advice Notice.

Engineers Signature Date

Print Name

Responsible Person's Signature

Copies : WHITE - Customer Copy YELLOW - Site Copy PINK - Office Copy GREEN - Engineer's Copy

GAS SAFETY CERTIFICATE

This form can be used as a Landlord's gas safety certificate

Page 1 of 2 Ser No. 33595

S74561

Enter Company Registration Number

Engineer [redacted]

Gas Safe [redacted]

Engie Office Address
UoS Accreditation
144 Endcliffe Crescent
Sheffield.
S10 3EA.

Contract Number UoS
Customer Name ENGIE
Site Address STANACE AB
Endcliffe Village
Sheffield
Postcode S10 3EL
Received By Signature

Landlords Details If Different
Name
Address
Postcode
Rented Accommodation YES/NO

App	Landlords appliance Yes/No	Service Inspection Repair	Appliance Details: Location	Type	Model	Serial Number	Burner Manufacturer	Flue Type (OF/RS/FL)
1	YES	SERVICE	STANACE AB	WATER HEATER	ANDREWS CWH90/200	071181	—	OF
2	YES	SERVICE		WATER HEATER	ANDREWS CWH90/200	071181	—	OF
3	YES	SERVICE		WATER HEATER	ANDREWS CWH90/200	071181	—	OF
4	/	/		/	/	/	—	—

General Safety Checks	Result	General Safety Checks	Result
Gas booster/compressor operating correctly (Yes /No/NA)	NA	Flue termination satisfactory (Yes/No/NA)	YES
Is there a current gas installation line diagram at primary meter (Yes/No/NA)	YES	Has a tightness test been carried out from local isolation valve (Yes/No/NA)	YES
Is the meter installation correct (Yes/No)	YES	Is gas pipework electrically bonded (Yes/No)	YES
Gas installation pipework adequately supported (Yes/No)	YES	Are adequate emergency isolation valves fitted (Yes/No)	YES
Gas installation pipework sleeved and sealed as appropriate (Yes/No)	YES	Are emergency valve handles in place and labelled (Yes/No)	YES
Is gas pipework colour coded or identified (Yes/No/NA)	YES	Do valves fall to the correct position (Yes/No)	YES
Is flue system installed in accordance with standards (Yes/No)	YES	Area clear of combustible materials (Yes/No)	YES

Ventilation			
Low level free area cm² or ~~ventilation fan rate m³/h~~	Actual 1680.0	Required (Calculated)	135.8
High level free area cm² or ~~ventilation fan rate extract m³/h~~	Actual 2284.8	Required (Calculated)	675.9
All ventilation grills clear and unobstructed (Yes/No) YES	Fans and/or flue interlocks operating correctly (Yes/No/NA)		NA

Details of any faults	Remedial Action Taken	Comments and calculations
/	/	/

Appliance Checks	App 1 or ~~App 1 High~~	App 2 or App 1 Low	App 3 or App 2 High	~~App 4 or App 2 Low~~
Flue flow test satisfactory (Yes/No/NA)	YES	YES	YES	
Spillage test satisfactory (Yes/No/NA)	YES	YES	YES	
Air/Gas switch operating correctly (Yes/No/NA)	NA	NA	NA	
Flame proving devices operating correctly (Yes/No/NA)	YES	YES	YES	
Burner lock out time (seconds)	63	64	64	
Temperature and limit thermostats operating correctly (Yes/No)	YES	YES	YES	
Heat net input rating data (kW)	31.1	31.1	31.1	

	App 1 or ~~App 1 High~~	App 2 or App 1 Low	App 3 or App 2 High	~~App 4 or App 2 Low~~
~~Gas burner make, model (adaptor~~ heat input kW/h required	31.1	31.1	31.1	
Gas burner pressure (mbar) or heat input kW/h measured	29.7	30.9	30.4	
Gas rating measured (kW/h / NA)	29.7	30.4	30.4	
Air/gas ratio control setting (%/NA)	NA	NA	NA	
Net flue gas temperature (gross less ambient) (°C)	53	49	47	
Oxygen (O_2 %)	5.5	5.6	5.6	
Carbon Monoxide (CO)(ppm)	46	52	58	

	App 1 or ~~App 1 High~~	App 2 or App 1 Low	App 3 or App 2 High	~~App 4 or App 2 Low~~
Carbon Dioxide (CO_2) (%)	8.8	8.8	8.8	
Excess Air (%)	35.9	36.7	37.0	
CO/CO_2 Ratio	0.0008	0.0006	0.0007	
Gross Efficiency (%)	98.6	98.7	99.9	
CO flue dilution (ppm)	NA	NA	NA	
Standing pressure (mbar)	22.2	22.2	22.2	
Working pressure (mbar)	19.0	19.0	19.0	
Is appliance safe for use (Yes/No)	YES	YES	YES	

Has a warning advice notice been raised (No or Warning notice Ser No or No's)	NO
Test Instrument	AP100 SP407 U200
Test Instrument serial number	U200CJ26151

Worksheet No (If used)	
Checked by (office use)	
Entered on database	YES.

Declaration of gas safety - I confirm that all of the above work described on this form has been satisfactorily completed in accordance with the current Gas Safety (installation and use) regulations, standards and procedures.

Date 20/10/20

Signature [redacted]

...te - Customer, Yellow - Service Centre, Pink - Site, Green - Engineer

ENGIE

GAS SAFETY CERTIFICATE

This form can be used as a Landlord's gas safety certificate

 Ser No. 33596

GAS safe REGISTER

574561

Enter Company Registration Number

Engineer [redacted]

Gas Safe [redacted]

Engie Office Address
UoS ACCOMMODATION
14 ENDCLIFFE CRESCENT
SHEFFIELD
S10 3EA

Contract Number UoS
Customer Name ENGIE
Site Address STAJACE AB
ENDCLIFFE VILLAGE
SHEFFIELD
Postcode S10 3EL
Received By Signature

Landlords Details If Different
Name
Address
Postcode
Rented Accommodation YES/NO

App	Landlords appliance Yes/No	Service Inspection Repair	Appliance Details: Location	Type	Model	Serial Number	Burner Manufacturer	Flue Type (OF/RS/FL)
1	YES	SERVICE	STAJACE AB	BOILER	VIESSMANN VITODENS	7176779702408100	–	OF
2	YES	SERVICE		BOILER	VIESSMANN VITODENS.	7176779702407103	–	OF
3	/	/	/	/	/	/	/	/
4								

General Safety Checks	Result	General Safety Checks	Result
Gas booster/compressor operating correctly (Yes /No/NA)	NA	Flue termination satisfactory (Yes/No/NA)	YES
Is there a current gas installation line diagram at primary meter (Yes/No/NA)	YES	Has a tightness test been carried out from local isolation valve (Yes/No/NA)	YES
Is the meter installation correct (Yes/No)	YES	Is gas pipework electrically bonded (Yes/No)	YES
Gas installation pipework adequately supported (Yes/No)	YES	Are adequate emergency isolation valves fitted (Yes/No)	YES
Gas installation pipework sleeved and sealed as appropriate (Yes/No)	YES	Are emergency valve handles in place and labelled (Yes/No)	YES
Is gas pipework colour coded or identified (Yes/No/NA)	YES	Do valves fail to the correct position (Yes/No)	YES
Is flue system installed in accordance with standards (Yes/No)	YES	Area clear of combustible materials (Yes/No)	YES

Ventilation			
Low level free area cm² ~~or ventilation flow rate m³/h~~	Actual 1680.0	Required (Calculated) 1351.8	
High level free area cm² ~~or ventilation flow rate m³/h~~	Actual 2284.8	Required (Calculated) 675.9	
All ventilation grills clear and unobstructed (Yes/No)	YES	Fans and/or flue interlocks operating correctly (Yes/No/NA)	NA.

Details of any faults	Remedial Action Taken	Comments and calculations
/	/	/

Appliance Checks	~~App 1 or~~ App 1 High	~~App 2 or~~ App 1 Low	~~App 3 or~~ App 2 High	~~App 4 or~~ App 2 Low		~~App 1 or~~ App 1 High	~~App 2 or~~ App 1 Low	~~App 3 or~~ App 2 High	~~App 4 or~~ App 2 Low		~~App 1 or~~ App 1 High	~~App 2 or~~ App 1 Low	~~App 3 or~~ App 2 High	~~App 4 or~~ App 2 Low
Flue flow test satisfactory (Yes/No/NA)	YES	YES	YES	YES	~~Gas burner pressure (mbar) or~~ heat input kW/h required	66.0	15.0	66.0	15.0	Carbon Dioxide (CO_2) (%)	9.0	8.8	9.1	9.0
Spillage test satisfactory (Yes/No/NA)	YES	YES	YES	YES	~~Gas burner pressure (mbar) or~~ heat input kW/h measured	62.5	22.6	62.5	20.5	Excess Air (%)	31.6	35.3	31.2	32.3
Air/Gas switch operating correctly (Yes/No/NA)	YES	YES	YES	YES	Gas rating measured (kW/h / NA)	62.5	22.6	62.5	20.5	CO/CO_2 Ratio	0.0004	0.0001	0.0004	0.0002
Flame proving devices operating correctly (Yes/No/NA)	YES	YES	YES	YES	Air/gas ratio control setting (%/NA)	NA	NA	NA	NA.	Gross Efficiency (%)	98.7	98.8	98.2	98.5
Burner lock out time (seconds)	162	162	164	164	Net flue gas temperature (gross less ambient) (°C)	53	50	64	57	CO flue dilution (ppm)	NA	NA	NA	NA.
Temperature and limit thermostats operating correctly (Yes/No)	YES	YES	YES	YES	Oxygen (O_2 %)	5.0	5.4	5.6	8.1	Standing pressure (mbar)	22.2	22.2	22.2	22.2
Heat net input rating data (kW)	66.0	15.0	66.0	15.0	Carbon Monoxide (CO)(ppm)	32	10	39	15	Working pressure (mbar)	19.6	21.5	19.6	21.5
										Is appliance safe for use (Yes/No)	YES	YES	YES	YES

Worksheet No (if used)	
Checked by (office use)	
Entered on database	YES

Declaration of gas safety - I confirm that all of the above work described on this form has been satisfactorily completed in accordance with the current Gas Safety (installation and use) regulations, standards and procedures.

Date	20/10/20
Signature	[redacted]

Has a warning advice notice been raised (No or Warning notice Ser No or No's)	NO
Test instrument	V200 CJ26151
Test instrument serial number	V200 CJ26151

White - Customer, Yellow - Service Centre, Pink - Site, Green - Engineer